CITY OF LACKAWANNA CITY HALL, 714 RIDGE RD. ROOM 311 LACKAWANNA NY, 14218

APPLICATION FOR BUILDING PERMIT

DATE:	_20	PERMIT NO
PROPERY LOCAT	TION:	
		•
_		
NAME OF	APPLICANT	EMAIL OF APPLICANT
PHONE NU	JMBER	ADDRESS OF APPLICANT
Application is here	by made for permis	sion to:
		ercialIndustrial
		on Remodel Repair Survey attached (Yes) (No)
		Survey attached (1 es)
	V	——————————————————————————————————————
Plans Attached: (Y	(No)	Insurance Certificates on File: (Yes) (No)
The construction of European	1	
Description of Wor	K:	
Siza of existing had	ilding/construction i	if applicable:
		ft. highnumber of stories
-	·	
	ew building/constru	
ft. wide	ft. long	ft. highnumber of stories
ESTIMATED PRO	OJECT COST: \$	
Number of units:		Flood zone designation:

Eric County Sewer Permit required: Yes	NO
recs:	•
Building Permit \$ Certif. Does preposed work entail electrical wor	icate of Occupancy \$
Does proposed work entail electrical wor	k and/or plumbing
Electrician and/or plumber must be licen:	sed in the City of Lackawanna
Electrician	Permit no Permit no
Plumber	Permit no
Name of Architect	
Address	Phone No
Name of Contractor	1
Name of Architect Address Name of Contractor Address	Phone No
In consideration of the granting of the per undersigned hereby agrees that if such per the terms thereof, the laws of the State of Lackawanna and regulations of the variou New York, that he/she will preserve the earnotification to the Code Enforcement Offi permit to be used the structure(s) covered Occupancy is legally issued. The undersigned hereby certifies that all of petition is correct and true.	mit is granted, he/she will comply with New York; the ordinances of the City of s departments of the City and State of stablished building line; give full cer and that he/she will not use or by the permit until a Certificate of
Property Owner	Address
Phone:	,
17	•
Architect or Contractor	Address
= -4, -4, -1, -1	e Artelyonii - i
Phone:	
I do certify that I have examined the forego premises described comply with the buildin City of Lackawanna.	oing petition, building plans and the ng code/zoning ordinances of the
Code Enforcement Officer	
Davrait No. Da	te issued

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Affidavit of Exemption to Show Specific Proof of Workers' Compensation Insurance Coverage for a 1, 2, 3 or 4 Family, Owner-occupied Residence

**This form cannot be used to waive the workers' compensation rights or obligations of any party. **

specific	ling condominiums) listed on the building permit th	of the 1, 2, 3 or 4 family, owner-occupied residence nat I am applying for, and I am not required to show erage for such residence because (please check the
	I am performing all the work for which the build	ling permit was issued.
	I am not hiring, paying or compensating in any wa for which the building permit was issued or helpi	ay, the individual(s) that is(are) performing all the work ing me perform such work.
	I have a homeowners insurance policy that is cur attached building permit AND am hiring or payi (aggregate hours for all paid individuals on the jo	irrently in effect and covers the property listed on the ing individuals a total of less than 40 hours per week obsite) for which the building permit was issued.
\$	forms approved by the Chair of the NYS Workers' (the building permit if I need to hire or pay individuals	ge and provide appropriate proof of that coverage on Compensation Board to the government entity issuing s a total of 40 hours or more per week (aggregate hours ated on the building permit, or if appropriate, file a CE-
)) 1	(including condominiums) listed on the building peri- workers' compensation coverage or proof of exempt of the NYS Workers' Compensation Board to the	on the 1, 2, 3 or 4 family, owner-occupied residence mit that I am applying for, provide appropriate proof of tion from that coverage on forms approved by the Chair government entity issuing the building permit if the agregate hours for all paid individuals on the jobsite) for
· · · · · · · · · · · · · · · · · · ·	(Signature of Homeowner)	(Date Signed)
(1	(Homeowner's Name Printed)	Home Telephone Number
Property	ty Address that requires the building permit:	Sworn to before me this day of (County Clerk or Notary Public)
		>

Once notarized, this BP-1 form serves as an exemption for both workers' compensation and disability benefits insurance coverage.

LAWS OF NEW YORK, 1998 CHAPTER 439

The general municipal law is amended by adding a new section 125 to read as follows:

125. ISSUANCE OF BUILDING PERMITS. NO CITY, TOWN OR VILLAGE SHALL ISSUE A BUILDING PERMIT

WITHOUT OBTAINING FROM THE PERMIT APPLICANT EITHER:

1. PROOF DULY SUBSCRIBED THAT WORKERS' COMPENSATION INSURANCE AND DISABILITY BENEFITS COVERAGE ISSUED BY AN INSURANCE CARRIER IN A FORM SATISFACTORY TO THE CHAIR OF THE WORKERS' COMPENSATION BOARD AS PROVIDED FOR IN SECTION FIFTY-SEVEN OF THE WORKERS' COMPENSATION LAW IS EFFECTIVE; OR

2. AN AFFIDAVIT THAT SUCH PERMIT APPLICANT HAS NOT ENGAGED AN EMPLOYER OR ANY EMPLOYEES AS THOSE TERMS ARE DEFINED IN SECTION TWO OF THE WORKERS' COMPENSATION LAW TO

PERFORM WORK RELATING TO SUCH BUILDING PERMIT.

Implementing Section 125 of the General Municipal Law

1. General Contractors - Business Owners and Certain Homeowners

For businesses and certain homeowners listed as the general contractors on building permits, proof that they are in compliance with Section 57 of the Workers' Compensation Law (WCL) is ONE of the following forms that indicate that they are:

- insured (C-105.2 or U-26.3),
- self-insured (SI-12), or
- are exempt (CE-200),

under the mandatory coverage provisions of the WCL. Any residence that is not a 1, 2, 3 or 4 Family, Owner-occupied Residence is considered a business (income or potential income property) and must prove compliance by filing one of the above forms.

2. Owner-occupied Residences

For homeowners of a 1, 2, 3 or 4 Family, Owner-occupied Residence, proof of their exemption from the mandatory coverage provisions of the Workers' Compensation Law when applying for a building permit is to file form BP-1 (12/08).

- Form BP-1shall be filed if the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is listed as the general contractor on the building permit, and the homeowner:
 - is performing all the work for which the building permit was issued him/herself,
 - is not hiring, paying or compensating in any way, the individual(s) that is(are) performing all the work for which the building permit was issued or helping the homeowner perform such work, or
 - has a homeowner's insurance policy that is currently in effect and covers the property for which the building permit was issued AND the homeowner is hiring or paying individuals a total of less than 40 hours per week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued.
- If the homeowner of a 1, 2, 3 or 4 Family, Owner-occupied Residence is hiring or paying individuals a total of 40 hours or MORE in any week (aggregate hours for all paid individuals on the jobsite) for the work for which the building permit was issued, then the homeowner may not file the "Affidavit of Exemption" form, BP-1(12/08), but shall either:
 - acquire appropriate workers' compensation coverage and provide appropriate proof of that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit (the C-105.2 or U-26.3 form), OR
 - have the general contractor, (performing the work on the 1, 2, 3 or 4 family, owner-occupied residence (including condominiums) listed on the building permit) provide appropriate proof of workers' compensation coverage, or proof of exemption from that coverage on forms approved by the Chair of the NYS Workers' Compensation Board to the government entity issuing the building permit,

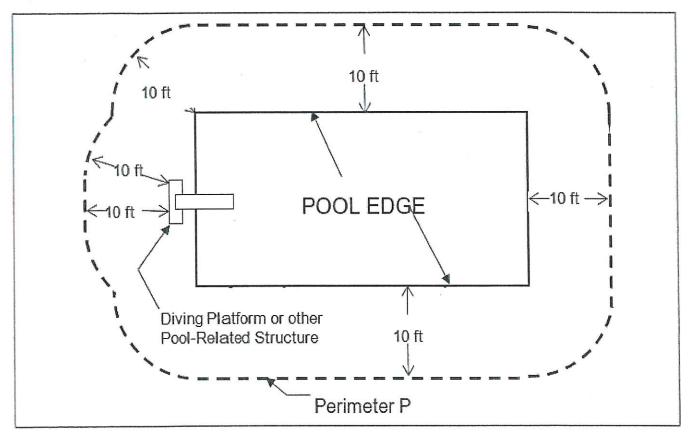
APPENDIX 3 - SWIMMING POOL CLEARANCE CRITERIA

National Grid shall use the criteria within Appendix 3 to determine the allowable clearance between overhead conductors and swimming pools and swimming pool related structures.

Criteria 1

The Company's overhead conductors are not to be located within 10 ft, horizontally, of a swimming pool, diving platform, diving tower, water slide, or other fixed, pool-related structure as illustrated by the dashed line (Perimeter P) in <u>Figure App3 -1</u>. Likewise, a swimming pool, diving platform, diving tower, water slide, or other fixed, pool-related structure is not to be located within 10 ft, horizontally, of an overhead conductor. Overhead conductors outside the 10 ft perimeter must also meet the clearance requirements illustrated in <u>Table App3-1</u> and <u>Figure App3-2</u>. See Note 2 of <u>Table App3-1</u> for 0V to 750V multiplex cable.

Figure App3-1: Swimming Pool Perimeter



Note for Figure App3-1: Overhead conductors are not to be located within Perimeter P

Criteria 2

If it is not physically practical to implement Criteria 1 within the property, then overhead conductors will be allowed within the dotted Perimeter P of <u>Figure App3-1</u>, but in accordance with the clearance requirements illustrated in <u>Table App3-1</u> and <u>Figure App3-2</u>.

City of Lackawanna, NY Wednesday, May 19, 2021

Chapter 230. Zoning

Article VI. Additional Use Requirements

§ 230-58. Swimming pools.

- A. Private swimming pools may be erected or installed as an accessory use in all zones.
- B. Swimming pools shall be located at least 10 feet from all property lines and shall not occupy more than 10% of the total lot area.
- C. The private swimming pool, surrounding yard or lot shall be enclosed and fenced; the wall of a principal or accessory building may be used to meet this requirement.
- D. Pool access shall be by way of a self-closing gate that shall remain locked whenever the pool is not under the direct adult supervision; locking devices shall be located at least 3.5 feet above ground level.
- E. Pools equipped with an integral filtration system, filter pumps, lighting or other mechanical devices shall be so located and constructed as to not interfere with the peace, comfort and repose of the occupant of any adjoining property.

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City of Lackawanna, NY Wednesday, May 19, 2021

Chapter 198. Swimming Pools

§ 198-2. Definitions.

As used in this chapter, unless the context or subject matter otherwise requires, the following terms shall have the meanings indicated:

FENCE

An enclosure at least four feet in height and not exceeding seven feet in height, constructed of masonry, wood, metal or wire no lighter than 11 gauge.

FRONT YARD

The area of a lot lying between the street lot line and the front of the dwelling extending across the full width of the lot. In the case of a corner lot, both yards facing on a street shall be considered front yards.

PRIVATE SWIMMING POOL

Any pool other than a portable aboveground pool, designed, used or maintained for swimming or wading purposes by an individual for use by the owner, his or her family, guests, or invitees and constructed, established or maintained upon any premises as an accessory use to the residence.

§ 198-3. Building permit required.

All private swimming pools, other than portable aboveground pools, in the City of Lackawanna, New York, erected, constructed, excavated either below, partly above or below grade, installed upon the premises within the City of Lackawanna, shall require a building permit.

§ 198-4. Building permit application.

- A. Required plans. A building permit application shall be made to the Director of Development and shall be accompanied by:
 - (1) A complete set of construction plans drawn accurately to scale or a copy of literature and plans or sketches provided by the pool manufacturer in a form acceptable to the Department of Development.
 - (2) A complete set of plot plans showing all lot lines, existing structures and yard measurements, drawn accurately to scale.
- B. Engineer or architect. All plans for private, permanent swimming pools of a capacity in excess of 1,500 cubic feet contained within a building or erected above or below ground level shall be designed by a licensed New York State professional engineer or architect.
- Cost for inground \$ 65
 Cost for above ground \$ 45
 (electrical permit required)

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